· VOID	`	PART B	B - FEE(S) TI	RANSMITTAL	11/04/04	#
Complete and send this form, together w pplicable fee(ee(s), to: <u>Mail</u> or <u>Fa</u> x	Commissioner I P.O. Box 1450 Alexandria, Vir	FEE	
INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed wh appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" maintenance fee notifications.						
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 26371 7590 08/05/2004 FOLEY & LARDNER LLP 777 EAST WISCONSIN AVENUE SUITE 3800 MILWAUKEE, WI 53202-5308				Note: A certificate of mailing can only be used for domestic mailings of Fee(s) Transmittal. This certificate cannot be used for any other accompany papers. Each additional paper, such as an assignment or formal drawing, m have its own certificate of mailing or transmission. Express Mail Label EV 505575138 US Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the Un States Postal Service with sufficient postage for ARXABAS mail in an envel addressed to the Mail Stop ISSUE FEE address above, or being facsim transmitted to the USPTO (703) 746-4000, on the date indicated below.		
11/05/2004 MAHMED2 00000068 10663954				7	Carolyn Simpson	(Depositor's na
01 FC:1501	1370.00 OP			Carol	Jovember 3, 2004	(Signat
02 FC:1504	300.00 DP					
APPLICATION NO.	FILING DATE	FIRST NAMED INVEN			ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/663,954 09/16/2003 TITLE OF INVENTION: VEHICLE COMPASS SYSTEM WITH CONTIN			Jeffrey N. Pa		026032-4602	3849
APPLN. TYPE	SMALL ENTITY	ISSUE FEE		PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional NO		\$1370 \$1370		\$300	\$ 1630 \$ 1670	11/05/2004
EXAMINER		ART UNIT C		CLASS-SUBCLASS		
BENNETT,	GEORGE B	2859	•	033-356000		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). Change of correspondence address (or Change of Correspondence			2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,			
Address form PTO/SB/122) attached. "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.			
3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)						
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.						
(A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)						
Johnson Controls Technology Company Plymouth, Michigan						
Please check the appropriate assignee category or categories (will not be printed on the patent); 🔲 individual 🕱 corporation or other private group entity 🚨 governm						
4a. The following fee(s) are enclosed: 4b. Payment of Fee(s):						
20 Issue Fee 22 A check in the amount of the fee(s) is enclosed.						
☐ Publication Fee (No small entity discount permitted) ☐ Payment by credit card. Form PTO-2038 is attached. ☐ The Director is hereby authorized by charge the required fee(s), or credit any overpayment Deposit Account Number						
5. Change in Entity Status (,				
a. Applicant claims SM	ALL ENTITY status. See 3	7 CFR 1.27.	🚨 b. Applicant is	not claiming SMALL EN	TITY status. See, e.g., 37 CF	R 1.27(g)(2).
The Director of the USPTO i	s requested to apply the Issu	e Fee and Publicat	tion Fee (if any) o	r to re-apply any previous	ly paid issue fee to the applic	ation identified above.

Par. 3, 2004 Marcus A. Burch, Reg. No. 52,673 This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to proc an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to comp this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 14 Alexandria, Virginia 22313-1450.

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(Authorized Signature)



IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant:

Parks et al.

Title:

VEHICLE COMPASS SYSTEM

WITH CONTINUOUS

AUTOMATIC CALIBRATION

Appl. No.:

10/663,954

Filing Date:

09/16/2003

Examiner:

Bennett, George B.

Art Unit:

2859

Conf. No.:

3849

CERTIFICATE OF EXPRESS MAILING I hereby certify that this correspondence is being deposited with the United States Postal Service's "Express Mail Post Office To Addressee" service under 37 C.F.R. § 1.10 on the date indicated below and is addressed to: Commissioner for Patents, P.O. Box

1450, Alexandria, VA 22313-1450.

EV 505575138 US (Express Mail Label Number) 11/3/04

(Date of Deposit)

Carolyn Simpson

ISSUE FEE TRANSMITTAL

Mail Stop Issue Fee Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Enclosed herewith please find Issue Fee Transmittal Form PTOL-85(B) along with a check in the amount of \$1,670.00 for payment of the Issue Fee and the Publication Fee for the above-identified utility patent application.

The Commissioner is hereby authorized to charge any additional fees which may be required regarding this application under 37 C.F.R. §§ 1.16-1.18, or credit any overpayment, to Deposit Account No. 06-1447. Should no proper payment be enclosed herewith, as by a check being in the wrong amount, unsigned, post-dated, otherwise improper or informal or even entirely missing, the Commissioner is authorized to charge the unpaid amount to Deposit Account No. 06-1447.

Respectfully submitted,

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